

October 11, 2016

US, EPA - AC Branch Notifications Department Region 2, 290 Broadway New York, NY 10007

Re:

Asbestos Abatement Project Notification - Amendment #1

195 Broadway, New York, NY-Cellar B

Dear Sir/Madam:

Please be advised that the above referenced asbestos project notification has been placed on hold. We will notify your department of a new start date when it becomes available.

HOLD

Should you have any questions please do not hesitate to call.

Sincerely,

ETS Contracting, Inc.

Renata D. Buczek 4334_2016-2017Filings"not

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION 1 of 2

Operator Project:	Postmark:	Date Received:	Not	ification: 1					
I. TYPE OF NOTIFICATION	(O=Original R=Revised):	0							
			or)		1				
II. FACILITY INFORMATION (Identify owner, removal contractor, and other operator) OWNER NAME: 195 BROADWAY PROPERTY LLC									
ADDRESS: 142 WEST 57 TH ST	REET								
CITY: NEW YORK	STATE: NY	!	ZIP CODE	E: 10019					
CONTACT: JONATHAN NIN	INIS		PHONE	E: 212-920-3368					
REMOVAL CONTRACTOR: ET	S CONTRACTING, INC.								
ADDRESS: 160 CLAY S'	TREET								
CITY: BROOKLYN	STATE: NY		ZIP CODE	: 11222					
CONTACT: ROBERT MIDDI	LETON		PHONE:	(718) 706-6300					
OTHER OPERATOR:	NOT APPLICABLE								
ADDRESS:									
CITY:	STATE:		ZIP CODE	:					
CONTACT:			PHONE:						
III. TYPE OF OPERATION (D	=Demo, O=Ordered, R=Renovation	on) R							
IV. IS ASBESTOS PRESENT?	(yes/no) YES								
V. FACILITY DESCRIPTION	(include building name, number,	floor and/or room nu	mber):						
BLDG. NAME: 195 BROADWA	λY								
ADDRESS: 195 BROADWAY									
CITY: NEW YORK		STATE:	NY	COL	JNTY: MANHATTAN				
SITE LOCATION: B CELLAR									
BUILDING SIZE SQ METE	RS: SQ FT: 986	,805	#OF F	LOORS: 26	AGE IN YEARS: 94				
PRESENT USE: COMMERIC	AL			PRIOR USE:	COMMERICAL				
VI. PROCEDURE, INCLUDIN	G ANALYTICAL METHOD, I	F APPROPRIATE,	USED TO DETECT	TO PRESENCE OF	ASBESTOS MATERIAL:				
SAMPLING AND ANALYS	IS ACCORDING TO EPA APP	ROVED METHOD	S.						
VII. APPROXIMATE OF RAC		N-FRIABLE ASBE	STOS MATERIAL T	HAT WILL NOT BI	E REMOVED. SPECIFY THE				
AMOUNT OF ASBESTOS	BELOW:			Non-friable Asbes	stos Materials To Be Removed:				
		RACM T	o Be Removed	Category I	Category II				
PIPES – LINEAR FEET		85 L	F·						
PIPES – LINEAR METERS									
SURFACE AREA – SQUARE FE	ET	112	SF						
SURFACE AREA – SQUARE MI	ETERS		The section of the se						
VOLUME RACM OFF FACILITY	VOLUME RACM OFF FACILITY COMPONENT - CUBIC FEET								
VOLUME RACM OFF FACILITY COMPONENT – CUBIC METERS									
VIII. SCHEDULED DATES AS	BESTOS REMOVAL (MM//D	D/YY) START: 1	0/12/2016	COMP	LETION: 10/11/2017				
IX. SCHEDULED DATES DE	MO/RENOVATION (MM/DE	D/YY) START:	TBD	COMPLETION	N: TBD				

J.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION (continued) 2 of 2

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

REMOVAL AND DISPOSAL OF ASBESTOS-CONTAINING MATERIALS (ACM) ACCORDING TO THE APPLICABLE RULES AND REGULATIONS.

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

ACM HAS BEEN IDENTIFIED AND WILL BE HANDLED ACCORDING TO THE APPLICABLE REGULATIONS.

XII. WASTE TRANSPORTER #1	WASTE TRANSPORTER #2					
NAME: TRI-STATE TRANSFER ASSOC. INC	NAME:					
ADDRESS: 1199 RANDAL AVENUE	ADDRESS:					
CITY: BRONX STATE: NY ZIP CODE: 10474	CITY: STA	ATE: ZIP CODE:				
CONTACT: JIM BRYNE PHONE: (718) 617-0771	CONTACT:	PHONE:				
WASTE TRANSPORTER #3						
NAME:	2	*				
ADDRESS:						
CITY: STATE: ZIP CODE:						
CONTACT: PHONE:						
XIII. WASTE DISPOSAL SITE						
NAME: MINERVA ENTERPRISES INC,						
LOCATION: 9000 MINERVA ROAD						
CITY: WAYNESBURG, OHIO						
PHONE: 330-866-3435						
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEAS	E IDENTIFY THE AGENCY BELOW:					
NAME: NOT APPLICABLE TITLE:						
AUTHORITY:						
DATE OF ORDER (MM/DD/YY): DATE O	RDERED TO BEGIN (MM/DD/YY):					
XV. FOR EMERGENCY RENOVATIONS NOT APPLICABLE						
DATE AND HOUR OF EMERGENCY (MM/DD/YY):						
DESCRIPTION OF SUDDEN OR UNEXPECTED EVENT:						
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WEBURDEN:	OULD CAUSE EQUIPMENT DAMAGE O	R AN UNREASONABLE FINANCIAL				
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMPLED, PULVERIZED OR REDUCED TO POWDER:						
ACM HAS BEEN IDENTIFIED AND WILL BE DEALT WITH ACCORD	ING TO ALL APPLICABLE REGULA	TIONS.				
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR. PART 61, SUBPART M) WILL BE ON- SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NOW MAL BUSINESS HOURS. (Required 1 year after promulgation).						
ROBERT MIDDLETON, ETS CONTRACTING INC. As Representative For The Owner Signature of	Dwner/Operator Da	9/27/16				
XVII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.	11/h					
ROBERT MIDDLETON, ETS CONTRACTING, INC	Owner/Operator D	<u>9/27/16</u>				

LETTER OF TRANSMITTAL ASSESSED

	LETTER OF TRAIVSIVITITAL								
То:	US-ENVIRONMENTAL PROTECTION AGENCY				Date:	9/27/2016			
	REGIC	ROADWAY, 21 DN 2 YORK, NY 1000			Re:	195 BROADWAY, NY, NY – B CELLAR			
_	ATTN:	ROSALIE SBER	.NA		Job#	4334/16			
For	Your:		T	The F	ollowing:				
	Annr	oval .							
	Use/Information Record Review/Comment			ם ב	Drawings/Specifications Close-Out Package				
01	RIG.	DATE		DES	CRIPTION				
	2	9/27/2016	ASBESTOS ABATEMENT PROJECT			T T			
			V						
Acti	on:								
	No Ac Return	t Return To Our tion Required ned For Correcti emarks							
Rem	arks:								
Enclosed is the above referenced notification. Should you have any questions, please feel free to contact our office. CAN YOU PLEASE SIGN AND RETURN RECEIVED COPY WITH ATTACHED SELF ADDRESSED AND STAMPED ENVELOPE TO OUR OFFICE.									
Cop	ies To <u>:</u>	File							
				Pr	epared By:	Renata D. Buczek			
	Sent Via: Hand Delivered Over Night FedEx DU.S. Mail								

LETTER OF TRANSMITTAL

То:	O: US-ENVIRONMENTAL PROTECTION AGENCY				Date:	10/14/2016	
	290 B REGIC	ROADWAY, 21 DN 2	ST FLOOR		Re:	MNRR-95 Virginia Rd .North White Plains, NY	
	NEW	YORK, NY 1000)7				
	ATTN:	ROSALIE SBER	NA		Job#	4330/15 WO # 90	
For	Your:			The .	Following:		
	Use/Information Record Review/Comment				□ Samples□ Drawings/Specifications□ Close-Out Package		
O	RIG.	DATE		DE	SCRIPTION		
	2	10/14/201 6	ASBESTOS ABATEMENT PRO	OJECT NO	TIFICATION	٧	
		-					
Acti	Sign & No Ac Return	& Return To Our tion Required ned For Correcti emarks				-	
Rem	arks:						
Enclosed is the above referenced notification. Should you have any questions, please feel free to contact our office. CAN YOU PLEASE SIGN AND RETURN RECEIVED COPY WITH ATTACHED SELF ADDRESSED AND STAMPED ENVELOPE TO OUR OFFICE.							
Сор	ies To <u>:</u>	<u>File</u>			Prenavad Dr.	Panata D. Ruozak	
				-		Renata D. Buczek	
					Sent Via: □ ☑U.S. Mail	Hand Delivered Over Night FedEx	

	T T				1 of 2
Operator Project:	Postmark:	Date Recei	ved: No	tification: 1 AMENDMENT#5	
I. TYPE OF NOTIFIC	CATION (O=Original, R=Rev	ised): R			
II. FACILITY INFOR	MATION (Identify owner, rer	noval contractor, and other of	perator)		
OWNER NAME: M	TA METRO NORTH RAIL	ROAD			
ADDRESS: 347	7 MADISON AVENUE				
CITY: NE	CW YORK	STATE: NY	ZIP COD	E: 10017	
CONTACT: MF	R. BRANDEE VELEZ		PHONE:	(212) 340-2358	
REMOVAL CONTRACT	OR: ETS CONTRACTING	, INC.			
ADDRESS: 160 C	CLAY STREET				
CITY: BRO	OKLYN	STATE: NY	ZIP COD	E: 11222	
CONTACT: MR.	RICHIE SMITH		PHONE:	(718) 706-6300	
OTHER OPERATOR:	NOT APPLICABLE				
ADDRESS:					
CITY:		STATE:	ZIP CODI	E:	
CONTACT:			PHONE:		
III. TYPE OF OPERAT	TION (D=Demo, O=Ordered,	R=Renovation) R			
IV. IS ASBESTOS PRE	ESENT? (yes/no) YES				
V. FACILITY DESCR	IPTION (include building na	me, number, floor and/or roo	m number):		
BLDG. NAME: 95	VIRGINIA ROAD				
ADDRESS: 95 VIRG	INIA ROAD				
CITY: N. WHIT	E PLAINS	STATE: NY	COL	JNTY: WESTCHESTER	
SITE LOCATION: NO	ORTH OFFICE & ENTIRE	ROOF			
BUILDING SIZE SO) METERS:	SQ FT: 11,000	#OF FLOORS	: 1 AGE IN YEARS: 58	
PRESENT USE: COMM	IERICAL			COMMERICAL	
VI. PROCEDURE, INC	CLUDING ANALYTICAL N	METHOD, IF APPROPRI		TO PRESENCE OF ASBESTOS M	ATERIAL:
	NALYSIS ACCORDING T				
				THAT WILL NOT BE REMOVED.	SPECIFY THE
AMOUNT OF ASI	BESTOS BELOW:			Non-friable Asbestos Materials	
		RAG	M To Be Removed	Category I	Category II
PIPES – LINEAR FEET				400 LF	***************************************
PIPES – LINEAR METE	RS				
SURFACE AREA – SQU	JARE FEET		1,400 SF	11,835 SF	
SURFACE AREA – SQU	JARE METERS				
VOLUME RACM OFF F	ACILITY COMPONENT - C	UBIC FEET			
VOLUME RACM OFF F	ACILITY COMPONENT – C	UBIC METERS			
VIII. SCHEDULED DA	TES ASBESTOS REMOVA	L (MM//DD/YY) STAF	T: 10/19/2016	COMPLETION: 11/30/2010	6
IX. SCHEDULED DAT	ΓES DEMO/RENOVATION	(MM/DD/YY) STAI	T: TBD	COMPLETION: TBD	
		()		The state of the s	

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION (continued) 2 of 2

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED: REMOVAL AND DISPOSAL OF ASBESTOS-CONTAINING MATERIALS (ACM) ACCORDING TO THE APPLICABLE RULES AND REGULATIONS.							
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: ACM HAS BEEN IDENTIFIED AND WILL BE HANDLED ACCORDING TO THE APPLICABLE REGULATIONS AND SWV MTA METRO NORTH # 15-0499, 15-0500, 15-0501, & 15-0505.							
XII. WASTE TRANSPORTER #1 WASTE TRANSPORTER #2							
NAME: FREEHOLD CARTAGE, INC. C/O WTS, INC. NAME:							
ADDRESS: 435 NORTH 2 ND STREET ADDRESS:							
CITY: LEWISTON STATE: NJ ZIP CODE: 14092 CITY: STATE: ZIP CODE:							
CONTACT: JAMES WEBER PHONE: (716) 754-5400 CONTACT: PHONE:							
WASTE TRANSPORTER #3							
NAME:							
ADDRESS:							
CITY: STATE: ZIP CODE:							
CONTACT: PHONE:							
XIII. WASTE DISPOSAL SITE							
NAME: VEOLIA ES GREENTREE LANDFILL, LLC							
LOCATION: 635 TOBY ROAD							
CITY: KERSEY, PA 15846							
PHONE: (814) 265-1744							
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:							
NAME: NOT APPLICABLE TITLE:							
AUTHORITY:							
DATE OF ORDER (MM/DD/YY): DATE ORDERED TO BEGIN (MM/DD/YY):							
XV. FOR EMERGENCY RENOVATIONS NOT APPLICABLE							
DATE AND HOUR OF EMERGENCY (MM/DD/YY):							
DESCRIPTION OF SUDDEN OR UNEXPECTED EVENT:							
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE FINANCIAL BURDEN:							
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMPLED, PULVERIZED OR REDUCED TO POWDER:							
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RICHIE SMITH, ETS CONTRACTING INC. As Representative For The Owner Signature of Owner/Operator Date							
XVII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.							
RICHIE SMITH, ETS CONTRACTING, INC As Representative For The Owner Signature Of Owner/Operator Date							



October 14, 2016

US, EPA – AC Branch Notifications Department Region 2, 290 Broadway New York, NY 10007

Re:

Asbestos Abatement Project Notification – Amendment #2 155 Avenue Of The Americas, New York, NY – 15th Floor

Dear Sir/Madam:

Please be advised that the above referenced asbestos project notification has additional quantities to be added.

ADDITIONAL QUANTITIES ADDED:

10^{1H} Floor-Passenger/Service Elevator Lobbies-810 SF of VAT Floor Tile 10th Floor SE Suite-1,700 SF of VAT Floor Tile

All other information remains the same. Should you have any questions please do not hesitate to call.

Sincerely

ETS Contracting, Inc.

Renata D. Buczek

I4747':4703'not



July 27, 2016

US, EPA – AC Branch Notifications Department Region 2, 290 Broadway New York, NY 10007

Re:

Asbestos Abatement Project Notification - Amendment #1 155 Avenue Of The Americas, New York, NY – 15th Floor

Dear Sir/Madam:

Please be advised that the above referenced asbestos project notification has a new start date and additional quantities to be added.

START DATE: 8/1/2016

ADDITIONAL QUANTITIES ADDED: 152 SF of VAT Floor Tile – 14 SE Corner

80 LF of Pipe Lagging – 15th Floor – Lobby Hallway

All other information remains the same. Should you have any questions please do not hesitate to call.

Sincerely

ETS Contracting, Inc.

Renata D. Buczek

i:4703'not

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION 1 of 2

Operator Project:	Postmark:	Date	Received:		Notification: 1				
I. TYPE OF NOTIFI	I. TYPE OF NOTIFICATION (O=Original, R=Revised): O								
II. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)									
OWNER NAME: TRI	OWNER NAME: TRINITY HUDSON HOLDINGS								
ADDRESS: 75 VARICK STREET									
CITY: NEW YORK	ST	ATE:NY			ZIP CODE: 10013				
CONTACT: MS.SAS	HA BLAUNT				PHON	IE: 646-328-0644			
REMOVAL CONTRAC	CTOR: ETS CONTRACTING, I	NC.		*** * ***					
ADDRESS: 160 CLAY STREET									
CITY: BRO	OOKLYN ST	ATE: NY			ZIP CODE: 11222				
CONTACT:					PHONE: (718) 706-6300				
OTHER OPERATOR:	NOT APPLICABLE								
ADDRESS:									
CITY:	S	TATE:		2	ZIP CODE:	and the second contract of the second contrac			
CONTACT:				F	HONE:				
III. TYPE OF OPERA	TION (D=Demo, O=Ordered, R=	=Renovation)	R						
IV. IS ASBESTOS PR	ESENT? (yes/no) YES								
V. FACILITY DESC	RIPTION (include building name	e, number, floor and	or room n	umber):					
BLDG. NAME: 155 AV	VENUE OF THE AMERICAS	×1112							
ADDRESS: 155 AVEN	UE OF THE AMERICAS								
CITY: NEW YORK		STA	ATE: NY		COUNT	Y: MANHATTAN			
SITE LOCATION: 15 TH	FLOOR								
BUILDING SIZE S	Q METERS: SO	Q FT: 225,692			#OF FLOORS: 15	AGE IN YEARS: 87			
PRESENT USE: COM	MERICAL				PRIOR USE: COMMERICA	AL	-		
VI. PROCEDURE, IN	CLUDING ANALYTICAL ME	ETHOD, IF APPR	OPRIATE	C, USED TO D	ETECT TO PRESENCE OF A	SBESTOS MATERIAL:			
SAMPLING AND	ANALYSIS ACCORDING TO	EPA APPROVED	METHO	DS.					
	OF RACM TO BE REMOVED SBESTOS BELOW:	AND NON-FRIA	BLE ASB	ESTOS MAT	ERIAL THAT WILL NOT BE	REMOVED. SPECIFY T	HE		
			RACM	To Be Remove		os Materials To Be Remov Catego	100000		
PIPES – LINEAR FEET			104 LF						
PIPES – LINEAR METE	ERS								
SURFACE AREA – SQI	UARE FEET								
SURFACE AREA – SQUARE METERS									
VOLUME RACM OFF FACILITY COMPONENT - CUBIC FEET									
VOLUME RACM OFF I	VOLUME RACM OFF FACILITY COMPONENT – CUBIC METERS								
VIII. SCHEDULED DA	ATES ASBESTOS REMOVAL	(MM//DD/YY)	START:	7/29/2016	COMPI	LETION: 7/28/2017			
IX. SCHEDULED DA	TES DEMO/RENOVATION	(MM/DD/YY)	START:	TBD	COMPLETION:	TBD			

J.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION (continued) 2 of 2

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

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ACM HAS BEEN IDENTIFIED AND WILL BE HANDLED ACCORDING TO THE APPLICABLE REGULATIONS.

XII. WASTE TRANSPORTER #1	WASTE TRANSPORTER #2							
NAME: TRI-STATE TRANSFER ASSOC. INC	NAME:							
ADDRESS: 1199 RANDALL AVENUE	ADDRESS:							
CITY: BRONX STATE: NY ZIP CODE: 10474	CITY: STATE: ZIP CODE:							
CONTACT: JIM BRYNE PHONE: (718) 617-0771	CONTACT: PHONE:							
WASTE TRANSPORTER #3								
NAME:	*							
ADDRESS:		-						
CITY: STATE: ZIP CODE:								
CONTACT: PHONE:								
XIII. WASTE DISPOSAL SITE								
NAME: MINERVA ENTERPRISES INC,								
LOCATION: 9000 MINERVA ROAD								
CITY: WAYNESBURG, OHIO								
PHONE:								
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEAS	E IDENTIFY THE AGENCY BELOW:							
NAME: NOT APPLICABLE TITLE:		-						
AUTHORITY:								
DATE OF ORDER (MM/DD/YY): DATE OF	RDERED TO BEGIN (MM/DD/YY):							
XV. FOR EMERGENCY RENOVATIONS NOT APPLICABLE								
DATE AND HOUR OF EMERGENCY (MM/DD/YY):								
DESCRIPTION OF SUDDEN OR UNEXPECTED EVENT:								
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOBURDEN:	DULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE FINANCIA	L						
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMPLED, PULVERIZED OR REDUCED TO POWDER:								
ACM HAS BEEN IDENTIFIED AND WILL BE DEALT WITH ACCORD	/							
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR. PART 61, SUBPART M) WILL BE ON- SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after promulgation).								
ROBERT MIDDLETON, ETS CONTRACTING INC. As Representative For The Owner Signature of Contracting Inc.	7/15/2016 Date 7/15/2016							
XVII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT	' / //							
ROBERT MIDDLETON, ETS CONTRACTING, INC As Representative For The Owner Signature Of Contracting Contra	Owner/Operator Date							

LETTER OF TRANSMITTAL

m							
To:	US-ENVIRONMENTAL PROTECTION AGENCY				Date:	7/15/2016	
	290 B REGIO	ROADWAY, 21 DN 2	ST FLOOR		Re:	155 AVENUE OF THE AMERICAS, NY, NY – 15 TH FLOOR	
	NEW	YORK, NY 1000)7				
*	ATTN:	ROSALIE SBER	NA	*	Job#	4703/16	
For	Your:			The I	- Following:		
	Use/Information Record Review/Comment					s/Specifications t Package	
O	RIG.	DATE		DES	SCRIPTION		
1	2	7/15/2016	ASBESTOS ABATEMENT F	PROJECT NO	TIFICATION	V	
Action: □ Sign & Return To Our Office □ No Action Required □ Returned For Corrections □ See Remarks							
Rema	arks:						
CAN	YOU	the above refere PLEASE SIGN TO OUR OFF	AND RETURN RECEIVED	you have any OCOPY WIT	questions, p TH ATTACI	olease feel free to contact our office. HED SELF ADDRESSED AND STAMPED	
Copi	es To <u>:</u>	<u>File</u>					
				Pr	repared By:	Renata D. Buczek	
					ent Via: 🔲 IU.S. Mail	Hand Delivered Over Night FedEx	

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION

1 of 2 **Operator Project:** Postmark: Date Received: Notification: 1 **AMENDMENT#4** I. TYPE OF NOTIFICATION (O=Original, R=Revised): R II. FACILITY INFORMATION (Identify owner, removal contractor, and other operator) OWNER NAME: MTA METRO NORTH RAILROAD ADDRESS: 347 MADISON AVENUE CITY: **NEW YORK** STATE: NY ZIP CODE: 10017 CONTACT: MR. BRANDEE VELEZ PHONE: (212) 340-2358 REMOVAL CONTRACTOR: ETS CONTRACTING, INC. ADDRESS: 160 CLAY STREET CITY: BROOKLYN STATE: NY ZIP CODE: 11222 CONTACT: MR. RICHIE SMITH PHONE: (718) 706-6300 OTHER OPERATOR: NOT APPLICABLE ADDRESS: CITY: STATE: ZIP CODE: CONTACT: PHONE: III. TYPE OF OPERATION (D=Demo, O=Ordered, R=Renovation) R IV. IS ASBESTOS PRESENT? (yes/no) YES V. FACILITY DESCRIPTION (include building name, number, floor and/or room number): BLDG. NAME: 95 VIRGINIA ROAD ADDRESS: 95 VIRGINIA ROAD CITY: N. WHITE PLAINS STATE: NY COUNTY: WESTCHESTER SITE LOCATION: NORTH OFFICE & ENTIRE ROOF **BUILDING SIZE** SQ METERS: SQ FT: 11,000 **#OF FLOORS: 1** AGE IN YEARS: 58 PRESENT USE: COMMERICAL PRIOR USE: COMMERICAL VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT TO PRESENCE OF ASBESTOS MATERIAL: SAMPLING AND ANALYSIS ACCORDING TO EPA APPROVED METHODS. VII. APPROXIMATE OF RACM TO BE REMOVED AND NON-FRIABLE ASBESTOS MATERIAL THAT WILL NOT BE REMOVED. SPECIFY THE AMOUNT OF ASBESTOS BELOW: Non-friable Asbestos Materials To Be Removed: RACM To Be Removed Category I Category II PIPES - LINEAR FEET 400 LF PIPES - LINEAR METERS SURFACE AREA - SQUARE FEET 1,400 SF 11,835 SF SURFACE AREA - SQUARE METERS VOLUME RACM OFF FACILITY COMPONENT - CUBIC FEET VOLUME RACM OFF FACILITY COMPONENT - CUBIC METERS VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM//DD/YY) START: 10/17/2016 **COMPLETION: 11/30/2016** IX. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) START: TBD COMPLETION: TBD

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION (continued) 2 of 2

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED: REMOVAL AND DISPOSAL OF ASBESTOS-CONTAINING MATERIALS (ACM) ACCORDING TO THE APPLICABLE RULES AND REGULATIONS.								
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: ACM HAS BEEN IDENTIFIED AND WILL BE HANDLED ACCORDING TO THE APPLICABLE REGULATIONS AND SWV MTA METRO NORTH # 15-0499, 15-0500, 15-0501, & 15-0505.								
XII. WASTE TRANSPORTER #1	WASTE TRANSPORTER #2							
NAME: FREEHOLD CARTAGE, INC. C/O WTS, INC.	NAME:							
ADDRESS: 435 NORTH 2 ND STREET	ADDRESS:							
CITY: LEWISTON STATE: NJ ZIP CODE: 14092	CITY: STATE: ZIP CODE:							
CONTACT: JAMES WEBER PHONE: (716) 754-5400	CONTACT: PHONE:							
WASTE TRANSPORTER #3								
NAME:								
ADDRESS:								
CITY: STATE: ZIP CODE:								
CONTACT: PHONE:								
XIII. WASTE DISPOSAL SITE								
NAME: VEOLIA ES GREENTREE LANDFILL, LLC								
LOCATION: 635 TOBY ROAD								
CITY: KERSEY, PA 15846								
PHONE: (814) 265-1744								
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEA	SE IDENTIFY THE AGENCY BELOW:							
NAME: NOT APPLICABLE TITLE:								
AUTHORITY:								
DATE OF ORDER (MM/DD/YY): DATE (ORDERED TO BEGIN (MM/DD/YY):							
XV. FOR EMERGENCY RENOVATIONS NOT APPLICABLE								
DATE AND HOUR OF EMERGENCY (MM/DD/YY):								
DESCRIPTION OF SUDDEN OR UNEXPECTED EVENT:								
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR W BURDEN:	OULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE FINANCIAL							
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMPLED, PULVERIZED OR REDUCED TO POWDER:								
ACM HAS BEEN IDENTIFIED AND WILL BE DEALT WITH ACCOR	DING TO ALL APPLICABLE REGULATIONS.							
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR. PART 61, SUBPART M) WILL BE ON- SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after promulgation).								
RICHIE SMITH, ETS CONTRACTING INC. As Representative For The Owner Signature of Owner/Open								
XVII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.	-1-							
RICHIE SMITH, ETS CONTRACTING, INC As Representative For The Owner Signature Of Owner/Operator Date								

					311	2 Mg C I TOO 1100
			Li	ETTER OF T	RANSMI	TTAL
	US-EN AGEN		L PROTECTION		Date:	10/13/2016
_	REGIC			_	Re:	MNRR-95 Virginia Rd .North White Plains, NY
		YORK, NY 1000 ROSALIE SBER		_		
_				_	Job#	4330/15 WO # 90
For Y	our:			The	Following:	
	Recor	Information rd w/Comment			_	ss/Specifications at Package
OR		DATE			ESCRIPTION	
2		10/13/201 6	ASBESTOS ABATEMEI	NT PROJECT NO	OTIFICATION (CONTINUE OF CONTINUE OF CONTI	N
Actio	n:					
	No Ac Return	k Return To Our tion Required ned For Corrects emarks				
Rema	rks:					
CAN	YOU	the above refere PLEASE SIGN E TO OUR OFF	AND RETURN RECEI	uld you have an VED COPY W	y questions, ITH ATTAC	please feel free to contact our office. CHED SELF ADDRESSED AND STAMPED
Copi	es To <u>:</u>	File		Г		
						: Renata D. Buczek
					Sent Via:	Hand Delivered Over Night FedEx

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION

1 of 2

Operator Project:	Postmark:	1	Date Received:	N	otification: 1			
I. TYPE OF NOTIFICATION (O=Original, R=Revised): O								
II. FACILITY INI	II. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)							
OWNER NAME: MTA – NEW YORK CITY TRANSITY AUTHORITY								
ADDRESS:	2 BROADWAY							
CITY:	BROOKLYN	STATE: NY		ZIP COI	DE: 10004			
CONTACT:	MR, RON GANDOLFO			PHONE: (646)	252-5904			
REMOVAL CONTE	RACTOR: ETS CONTRACTIN	G, INC.						
ADDRESS: 1	60 CLAY STREET							
CITY:	BROOKLYN	STATE: NY		ZIP COI	DE: 11222			
CONTACT:	MR. RICHIE SMITH			PHONE	E: (718) 706-6300			
OTHER OPERATO	R: NOT APPLICABI	LE						
ADDRESS:								
CITY:		STATE:		ZIP COI	DE:			
CONTACT:				PHONE				
III. TYPE OF OPE	RATION (D=Demo, O=Ordered	l, R=Renovation)	R					
IV. IS ASBESTOS	PRESENT? (yes/no) YES							
V. FACILITY DE	SCRIPTION (include building n	ame, number, floor	and/or room nu	imber):				
BLDG. NAME:	810 BRADY AVENUE							
ADDRESS:	810 BRADY AVENUE				·			
CITY:	BRONX	STA	TE: NY		COUNTY: BRONX			
SITE LOCATION:	ROOF/PERIMETER							
BUILDING SIZE	SQ METERS:	SQ FT: 1,500		#OF FLOORS: 2	AGE IN YEARS: 70+			
PRESENT USE: SU	UBSTATION			PRIOR USE: SUBS	TATION			
VI. PROCEDURE	, INCLUDING ANALYTICAL	METHOD, IF AI	PPROPRIATE	, USED TO DETEC	T TO PRESENCE OF ASBESTOS MA	ΓERIAL:		
SAMPLING AN	ND ANALYSIS ACCORDING	TO EPA APPROV	VED METHOL	OS.				
		VED AND NON-F	RIABLE ASBI	ESTOS MATERIAL	THAT WILL NOT BE REMOVED. S	PECIFY THE		
AMOUNT OF	FASBESTOS BELOW:		D. CM		Non-friable Asbestos Materials To	A 1990 DE THEFTO AND LEADINGS DE ALCONOMIC		
			RACM	To Be Removed	Category I	Category II		
PIPES – LINEAR FI	EET				160 LF			
PIPES – LINEAR M	ETERS							
SURFACE AREA –	SQUARE FEET				320 SF			
SURFACE AREA –	SQUARE METERS							
VOLUME RACM OFF FACILITY COMPONENT - CUBIC FEET								
VOLUME RACM C	VOLUME RACM OFF FACILITY COMPONENT – CUBIC METERS							
VIII, SCHEDULEI	D DATES ASBESTOS REMOV	AL (MM//DD/Y	Y) START:	10/24/2016	COMPLETION: 11/30/2016			
IX. SCHEDULED	DATES DEMO/RENOVATIO	N (MM/DD/YY	Y) START:	ГВО	COMPLETION: TBD			

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION (continued) 2 of 2

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED:

THIS ASBESTOS ABATEMENT PROJECT WILL BE DONE IN ACCORDANCE WITH THE APPLICABLE NEW YORK STATE INDUSTRIAL CODE RULE #56 AND NYCTA SYSTEM WIDE VARIANCE # 16-0631.

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

ACM HAS BEEN IDENTIFIED AND WILL BE HANDLED ACCORDING TO THE APPLICABLE REGULATIONS AND MTA NYCTA SWV#16-0631.

XII. WASTE TRANSPORTER #1 WASTE TRANSPORTER #2						
NAME: TRI-STATE TRANSFER ASSOC., INC. NAME: ETS CONTRACTING, INC						
ADDRESS: 1199 RANDALL AVENUE ADDRESS: 160 CLAY STREET						
CITY: BRONX STATE: NY ZIP CODE: 10474 CITY: BROOKLYN STATE: NY ZIP CODE: 11222						
CONTACT: JIMMY BYRNE PHONE: (718) 617-0771 CONTACT: ANDRZEJ BARNOWSKI PHONE: 718-706-6300						
WASTE TRANSPORTER #3						
NAME:						
ADDRESS:						
CITY: STATE: ZIP CODE:						
CONTACT: PHONE:						
XIII. WASTE DISPOSAL SITE						
NAME: MINERVA ENTERPRISES, INC.						
LOCATION: 9000 MINERVA ROAD						
CITY: WAYNESBURG, OHIO 44688						
PHONE: 330-866-3435						
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:						
NAME: NOT APPLICABLE TITLE:						
AUTHORITY:						
DATE OF ORDER (MM/DD/YY): DATE ORDERED TO BEGIN (MM/DD/YY):						
XV. FOR EMERGENCY RENOVATIONS NOT APPLICABLE						
DATE AND HOUR OF EMERGENCY (MM/DD/YY):						
DESCRIPTION OF SUDDEN OR UNEXPECTED EVENT:						
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE FINANCIAL BURDEN:						
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMPLED, PULVERIZED OR REDUCED TO POWDER:						
ACM HAS BEEN IDENTIFIED AND WILL BE DEALT WITH ACCORDING TO ALL APPLICABLE REGULATIONS.						
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR. PART 61, SUBPART M) WILL BE ON- SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after promulgation).						
RICHIE SMITH, ETS CONTRACTING INC. As Representative For The Owner Signature of Owner/Operator Date						
XVII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT						
RICHIE SMITH, ETS CONTRACTING, INC As Representative For The Owner Signature of Owner/Operator 10/10/16 Date						

LETTER OF TRANSMITTAL

То:	US-ENVIRONMENTAL PROTECTION AGENCY 290 BROADWAY, 21 ST FLOOR REGION 2				Date:	MTA – 810 BRADY AVENUE, BRONX, NY – ROOF/PERIMETER		
-	NEW YORK, NY 10007 ATTN: ROSALIE SBERNA			Jo		4745/16		
For	Your:			The I	Following:			
 □ Approval □ Use/Information ☑ Record □ Review/Comment □ Other 				 □ Samples □ Drawings/Specifications □ Close-Out Package ☑ Other 				
	RIG.	DATE		DESCRIPTION				
	2	10/10/201 6	ASBESTOS ABATEMENT PR	ROJECT NO	TIFICATION	N		
Action	Sign & No Ac Return	t Return To Our tion Required ned For Correct: emarks						
Rem	arks:							
Enclosed is the above referenced notification. Should you have any questions, please feel free to contact our office. CAN YOU PLEASE SIGN AND RETURN RECEIVED COPY WITH ATTACHED SELF ADDRESSED AND STAMPED ENVELOPE TO OUR OFFICE.								
Сор	ies To <u>:</u>	File				2 . 2 2		
				P	repared By:	Renata D. Buczek		
					ent Via: U.S. Mail	Hand Delivered Over Night FedEx		

October 14, 2016

US, EPA – AC Branch Notifications Department Region 2, 290 Broadway New York, NY 10007

Re:

Asbestos Abatement Project Notification – Amendment #2 87-28 109^{th} Street, Richmond Hill, NY – Roof Level

Dear Sir/Madam:

Please be advised that the above referenced asbestos project notification has new start date.

START DATE: 10/19/16

All other information remains the same. Should you have any questions please do not hesitate to call.

Sincerely

ETS Contracting, Inc.

Renata D. Buczek

i:4737'not



October 4, 2016

US, EPA – AC Branch Notifications Department Region 2, 290 Broadway New York, NY 10007

Re:

Asbestos Abatement Project Notification – Amendment #1 87-28 109th Street, Richmond Hill, NY – Roof Level

Dear Sir/Madam:

Please be advised that the above referenced asbestos project notification has been placed on hold. We will notify your department of a new start date when it becomes available.

HOLD

All other information remains the same. Should you have any questions please do not hesitate to call.

Sincerely

ETS Contracting, Inc.

Renata D. Buczek

i:4737'not

U.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION 1 of 2

Operator Project:	*	Postmark:	Б	ate Receive	ed:	Notifica	ation: 1	
I. TYPE OF NOT	TIFICATION (C	D=Original, R=Revise	ed): O					
	II. FACILITY INFORMATION (Identify owner, removal contractor, and other operator)							
OWNER NAME:					autor)			
ADDRESS: 355 FO	DREST AVENU	JE						
CITY: STATEN IS	SLAND	ST	ATE:NY			ZIP CODE: 10	301	
CONTACT: MR.	NICHOLAS RA	AMOS				EN CODE. 10		PHONE: 718-273-0210
REMOVAL CONTR	RACTOR: ETS	CONTRACTING, I	NC.			-		PHONE: 718-273-0210
ADDRESS: 1	60 CLAY STR	EET						
CITY: E	BROOKLYN	ST.	ATE: NY			ZIP CODE: 11	222	
CONTACT: ROB	ERT MIDDLE	TON					18) 706-6300	
OTHER OPERATOR	R: NO	T APPLICABLE				(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
ADDRESS:								
CITY:		S	ГАТЕ:		(4)	ZIP CODE:		
CONTACT:						PHONE:		9
III. TYPE OF OPER	RATION (D=De	emo, O=Ordered, R=	Renovation)	R				
IV. IS ASBESTOS	PRESENT? (ye	es/no) YES						
V. FACILITY DES	SCRIPTION (in	clude building name,	number, floor a	nd/or room	number):			
BLDG. NAME: 87-2	8 109 TH STREE	T						
ADDRESS: 87-28 10	9 TH STREET							
CITY: RICHMOND	HILL			STAT	E: NY			COUNTY:QUEENS
SITE LOCATION: RO	OOF LEVEL							
BUILDING SIZE	SQ METERS:	SQ	FT: 68,125		No.	#OF FLOORS	S: 5	AGE IN YEARS: 107
PRESENT USE:	COMMERICA	L						COMMERICAL
VI. PROCEDURE, 1	INCLUDING A	NALYTICAL MET	HOD, IF APP	ROPRIATI	E, USED TO D	ETECT TO P		SBESTOS MATERIAL:
		CCORDING TO E						
VII. APPROXIMATI AMOUNT OF A	E OF RACM T ASBESTOS BE	O BE REMOVED A	ND NON-FRI	ABLE ASB	ESTOS MAT	ERIAL THAT	WILL NOT BE	REMOVED. SPECIFY THE
				RACM	To Be Remove	d C	on-friable Asbesto Category I	os Materials To Be Removed: Category II
PIPES – LINEAR FEE	T							
PIPES – LINEAR MET	ΓERS							
SURFACE AREA – SO	QUARE FEET						3,890 SF	
SURFACE AREA – SO	QUARE METER	as					5,070 51	
VOLUME RACM OFF	FACILITY CO	MPONENT - CUBIC	FEET					
VOLUME RACM OFF	FACILITY CO	MPONENT – CUBIC	METERS			*		
VIII. SCHEDULED DATES ASBESTOS REMOVAL (MM//DD/YY) START: 10/6/2016 COMPLETION: 10/5/2017								
IX. SCHEDULED DA	ATES DEMO/F	RENOVATION (I	MM/DD/YY)	START:	TBD	C	COMPLETION:	TBD

J.S. ENVIRONMENTAL PROTECTION AGENCY - NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND MÉTHOD(S) TO BE USED:

REMOVAL AND DISPOSAL OF ASBESTOS-CONTAINING MATERIALS (ACM) ACCORDING TO THE APPLICABLE RULES AND REGULATIONS.

XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

ACM HAS BEEN IDENTIFIED AND WILL BE HANDLED ACCORDING TO THE APPLICABLE REGULATIONS.

XII. WASTE TRANSPORTER #1	WASTE TRANSPORTER #2						
NAME: TRI-STATE TRANSFER ASSOC. INC	NAME:						
ADDRESS: 1199 RANDALL AVENUE	ADDRESS:						
CITY: BRONX STATE: NY ZIP CODE: 10474	CITY: STATE: ZIP CODE:						
CONTACT: JIM BRYNE PHONE: (718) 617-0771	CONTACT: PHONE:						
WASTE TRANSPORTER #3							
NAME:							
ADDRESS:							
CITY: STATE: ZIP CODE:							
CONTACT: PHONE:							
XIII. WASTE DISPOSAL SITE							
NAME: MINERVA ENTERPRISES INC,							
LOCATION: 9000 MINERVA ROAD							
CITY: WAYNESBURG, OHIO							
PHONE: 330-866-3435							
XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE	IDENTIFY THE AGENCY BELOW:						
NAME: NOT APPLICABLE TITLE:							
AUTHORITY:							
DATE OF ORDER (MM/DD/YY): DATE OR	DERED TO BEGIN (MM/DD/YY):						
XV. FOR EMERGENCY RENOVATIONS NOT APPLICABLE							
DATE AND HOUR OF EMERGENCY (MM/DD/YY):							
DESCRIPTION OF SUDDEN OR UNEXPECTED EVENT:							
EXPLANATION OF HOW THE EVENT CAUSED UNSAFE CONDITIONS OR WOULD CAUSE EQUIPMENT DAMAGE OR AN UNREASONABLE FINANCIAL BURDEN:							
XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMPLED, PULVERIZED OR REDUCED TO POWDER:							
ACM HAS BEEN IDENTIFIED AND WILL BE DEALT WITH ACCORDING TO ALL APPLICABLE REGULATIONS.							
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR. PART 61, SUBPART M) WILL BE ON- SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after promulgation). ROBERT MIDDLETON, ETS CONTRACTING INC. As Representative For The Owner.							
As Representative For The Owner Signature of Owner/Operator 9/22/16 Date Date							
OBERT MIDDLETON, ETS CONTRACTING, INC s. Representative For The Owner Signature Of Ow	/// 9/22/16 //ner/Operator Date						
7	Mer/Operator Date						

LETTER	OF	TRAI	<i>VSMIT</i>	TAL

					10111111	712 12 12 12 12 12 12 12 12 12 12 12 12 1
То:	US-ENVIRONMENTAL PROTECTION AGENCY 290 BROADWAY, 21 ST FLOOR REGION 2 NEW YORK, NY 10007				Date:	9/22/2016
				Re:		87-28 109 TH STREET, RICHMOND HILL, NY – ROOF LEVEL
					,	
	ATTN	: ROSALIE SBEI	RNA		Job#	4737/16
For	Your:			The	Following:	
					Samples Drawings Close-Ou Other	s/Specifications t Package
Ol	RIG.	DATE		DE	SCRIPTION	
	2	9/22/2016	ASBESTOS ABATEMENT			
Actio	Sign &	Return To Our tion Required ted For Correction emarks				
Rema	rks:					
		he above refere PLEASE SIGN A TO OUR OFFI	MIND MILLOWY RECEIVES	you have any O COPY WIT	questions, p H ATTACH	lease feel free to contact our office. IED SELF ADDRESSED AND STAMPED
Copie	es To <u>:</u>	<u>File</u>				
				Pr	epared By:	Renata D. Buczek
				Se.		land Delivered Over Night FedEx
					·	